REMARKS

Claims 1-20 are pending in the applications with claims 1-5, 14 and 18 being amended by this response. Support for the amendments to the claims may be found throughout the specification and, more specifically, in Figure 1 and on page 4, line 27 – page 5, line 29 and page 10, line 9 – page 11, line 3.. Therefore, Applicant respectfully submits that no new matter is added by the amendments to the claims.

Rejection of claims 1-20 under 35 U.S.C. 102(e)

Claims 1-20 are rejected under 35 U.S.C. 102(e)as being anticipated by Provost et al. (U.S. Patent No. 7,263,493).

Amended claim 1 recites a system for processing partial claim data related to provision of healthcare to a patient. The system includes an interface processor for receiving data representing a partial claim for reimbursement for services provided to a patient at different stages of patient interaction with a healthcare provider, the partial claim includes an incomplete claim lacking information needed for claim reimbursement by a payer organization. A pre-processor processes the data representing the partial claim to identify deficiencies in the partial claim. The processing includes applying rules to the data representing the partial claim to identify errors in the partial claim by filtering deficiencies concerning entered current partial data from potential deficiencies related to unavailability of information due to stage of processing and determines a subset of the errors attributable to at least one of, (a) an invalid data item and (b) an incomplete data item, in the partial claim representative data. A result processor initiates generation of an alert message identifying the subset of the errors to a user. For the reasons presented below, Provost fails to show or suggest the claimed arrangement.

Provost provides a method and system for requesting and delivering supporting documents to an insurance carrier to enable the carrier to process an insurance claim for services rendered by an institutional health care provider. The system converts hard copies of documents into electronic images that are accessible through the internet. The appropriate documents are attached so that the claim is complete and to provide advance payment to a healthcare provider prior to submission of the claim to a payer based on pre-adjudication of the claim to determine that the claim is complete (see Abstract). However, this is fundamentally different from the present claimed arrangement because Provost neither discloses nor suggests a system that determines

claim line items that are individually entered and are processed to determine if the value for the particular item is correct at a specific stage of interaction between a patient and a healthcare provider. Specifically, Provost is unlike the present claimed arrangement because Provost fails to disclose or suggest "an interface processor for receiving data representing a partial claim for reimbursement for services provided to a patient at different stages of patient interaction with a healthcare provider, said partial claim comprising an incomplete claim lacking information needed for claim reimbursement by a payer organization" as in the claimed invention.

The Rejection cites column 11, lines 55-61 in support of the assertion that Provost anticipates processing partial claim data related to provision of healthcare to a patient as claimed in the present invention. Applicant respectfully disagrees. Instead, column 11, lines 55-61 of Provost merely describe a server system 14 used to determine whether the information in claim form 28b is sufficiently complete (Provost, Fig. 2). Provost is concerned with completed claims that have been submitted and are ready to be sent to a payer. The system of Provost determines reasons for rejecting a completed insurance claim and then either denies advance payment of funds for services rendered or returns the claim to the healthcare provider for revision (Provost, column 12, lines 25-45). Provost is not concerned with, nor recognizes the advantages of, determining whether a partially complete claim is correct at individual stages of patient interaction with a healthcare provider. The present claimed arrangement allows "partial claim data 2 gathered at any stage of the patient interaction" (see Figure 1) to be forwarded to a partial data evaluator to produce a data map that enables a determination that information entered at a particular stage of patient interaction is valid.- (Application, page 5, lines 7 - 14). The present claimed arrangement enables a data collection worker to correct data errors from wrong information or lack of information in the partially completed claim by interaction with a patient who is still present during healthcare interaction. This advantageously allows any problems in a claim to be quickly and easily corrected before claim submission to a payer.

Moreover, the Office Action cites column 11, lines 55 – 61 in support of the assertion that Provost anticipates the claimed feature of "applying rules to said data representing said partial claim data to identify errors in said partial claim data". However, Provost fails to disclose or suggest any manner by which this error identification is to occur. Specifically, Provost merely provides an example of the server system being able to identify if certain information is missing. The Provost

system neither discloses nor suggests "filtering deficiencies concerning entered current partial data from potential deficiencies related to unavailability of information due to stage of processing" as in the claimed invention. Unlike the claimed invention, Provost describes a system that error checks a claim **after the fact**. Contrary to Provost, the present claimed system enables stage specific pre-processing of claim data which is able to correct deficiencies at that particular stage of patient interaction.

Therefore, as Provost fails to disclose each feature claimed in claim 1, it is respectfully submitted that Provost does not anticipate the present invention as claimed in claim 1. Consequently, withdrawal of the rejection of claim 1 is respectfully requested

Amended claim 2 is dependent on claim 1 and is considered patentable for the reasons presented above with respect to claim 1. Claim 2 is also considered patentable because Provost neither discloses nor suggests "different stages include at least two of, (a) initial visit, (b) admission and (c) consultation with a physician" as in the present claimed system. As mentioned above with respect to claim 1, Provost is merely concerned with ensuring that a claim is complete and ready for submission to a healthcare provider, and is not concerned with and is unable to track any errors that may result at different stages of patient interaction with a healthcare provider. This is wholly unlike the present claimed arrangement, in which "the partial claim data collator 2 is implemented to gather claim data information at **different stages in the patient interaction with the healthcare provider**" (Application, page 4, line 29-page 5, line 1). Thus, the claimed system is able to filter "deficiencies concerning entered current partial data from potential deficiencies related to unavailability of information due to stage of processing" wherein the "different stages include at least two of, (a) initial visit, (b) admission and (c) consultation with a physician". For each stage of interaction, "said pre-processor determines said subset of said errors by at least one of, (a) determining a data item necessary for claim submission and determinable from said partial claim representative data is missing and (b) a data item field contains an entry when it should be blank" as recited in the claimed arrangement. Contrary to the claimed system, Provost is only concerned with after-the-fact error checking of a presented purportedly complete claim by a server system and is unable to "identify deficiencies in said partial claim". Consequently, withdrawal of the rejection of claim 2 is respectfully requested.

The present claimed arrangement is able to take advantage of the patient's presence at

the healthcare facility to help correct any problems found by the system in a partially completed claim. The pre-processor generates an alert message in real time to a user of the system, the user may then ask the patient for information that would correct any deficiencies in the partial claim (Application, page 7, lines 18-26; page 12, lines 3-10). This is wholly unlike Provost, which neither recognizes nor suggests these advantages. Provost is merely concerned with evaluating a complete claim that is ready to be submitted to a healthcare provider and then decides whether the completed claim has any data problems that would prevent it from being sent to the healthcare provider. Consequently, withdrawal of the rejection of claim 4 is respectfully requested.

Amended Independent claim 5 is considered patentable for the reasons presented above with respect to claims 1 and 4. Consequently, withdrawal of the rejection of claim 5 is respectfully requested.

Claim 6-10 are dependent on claim 5 and are considered patentable for the reasons presented above with respect to claims 1, 4 and 5. Consequently, withdrawal of the rejection of claims 6-10 is respectfully requested.

Claim 11 is dependent on claim 10 and is considered patentable for the reasons presented above with respect to claim 10. Consequently, withdrawal of the rejection of claim 11 is respectfully requested.

Claim 12 is dependent on claim 11 and is considered patentable for the reasons presented above with respect to claim 11. Consequently, withdrawal of the rejection of claim 12 is respectfully requested.

Claim 13 is dependent on claim 12 and is considered patentable for the reasons presented above with respect to claim 12. Consequently, withdrawal of the rejection of claim 13 is respectfully requested.

Amended Independent claim 14 is considered patentable for the reasons presented above with respect to claim 1. Claim 14 is also considered patentable because Provost neither discloses nor suggests the use of a **repository**, which includes a first map that associates partial claim data items with a set of verification rules. The present claimed arrangement stores a rules-to-data-dependency-map that is able to identify the rules related to each field of information in a partially completed or fully completed claim

(Applications, page 5, lines 17-29). Moreover, Provost fails to disclose or suggest "an interface processor for receiving **sets of partial claim data at different stages of patient interaction with a healthcare provider**, said partial claim comprising an incomplete claim lacking information needed for claim reimbursement by a payer organization" as recited in the claimed arrangement. As discussed above, Provost is not at all concerned with stage dependent claim processing and instead requires the claim to be completed and ready for submission to check for any errors. In contrast, the claimed arrangement receives "sets of partial claim data at different stages" to advantageously determine and allow for error correction at the current stage of patient interaction when a provider can directly interact with the patient to ensure a corrected data value is entered. Furthermore, Provost fails to disclose or suggest "applying the associated verification rules to the received set of partial claim data to identify deficiencies in said collated claim data of said partial claim by filtering deficiencies concerning entered current partial data from potential deficiencies related to unavailability of information due to stage of processing" as recited in the claimed arrangement. No where in Provost is this feature disclosed or suggested. Consequently, withdrawal of the rejection of claim 14 is respectfully requested.

Claim 15 is dependent on claim 14 and is considered patentable for the reasons presented above with respect to claim 14. Consequently, withdrawal of the rejection of claim 15 is respectfully requested.

Claim 16 is dependent on claim 15 and is considered patentable for the reasons presented above with respect to claim 15. Consequently, withdrawal of the rejection of claim 16 is respectfully requested.

Claim 17 is dependent on claim 16 and is considered patentable for the reasons presented above with respect to claim 16. Consequently, withdrawal of the rejection of claim 17 is respectfully requested.

Amended Independent claim 18 is considered patentable for the reasons presented above with respect to claim 1. Claims 18 is also considered patentable because Provost neither discloses nor suggests conditioning a claims processor to identify errors in partial claim data "related to unavailability of information **due to stage of processing.**" Provost is merely concerned with the fields in a submitted completed claim, and does not contemplate the advantages of evaluating the claim at

individual stages. Consequently, withdrawal of the rejection of claim 17 is respectfully requested.

Claim 19 is dependent on claim 18 and is considered patentable for the reasons presented above with respect to claim 18. Consequently, withdrawal of the rejection of claim 19 is respectfully requested.

Claim 20 is dependent on claim 19 and is considered patentable for the reasons presented above with respect to claim 19. Consequently, withdrawal of the rejection of claim 20 is respectfully requested.

Having fully addressed the Examiner's rejections, it is believed that, in view of the preceding amendments and remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant's attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

Respectfully submitted,

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18 February 2008

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